



The Northeast Redesign Collaborative

A Quest for Patient-Centered Care...

WHY?

- ◆ Because patients complain they spend too much time in the waiting room.
- ◆ Because your talented and committed staff wonder how much longer they can work in a frustrating workplace.
- ◆ Because your health center needs to be more productive.
- ◆ Because staff don't work together as a team.
- ◆ Because sixty-four health centers have proven these problems have solutions.

Why redesign? Because of any or all the above reasons. The Bureau of Primary Health Care's Redesign Collaborative is simply the nation's most exciting and proven reengineering program in primary health care. It will help you overhaul work processes to create a patient experience second to none, a workplace second to none, and productivity second to none. It will guide you and your team in streamlining work processes, squeezing the waiting time out of the patient visit, and teaching staff how to work in teams.

WHAT

What is a Redesign Collaborative? An opportunity to break through problems that have plagued you for decades. The Redesign Collaborative is a six-month guided journey of change that your five-member team will share with fourteen other teams from health centers throughout the region. Experienced health center reengineering trainers will guide you through team selection and coach your team throughout the Collaborative. Your team will attend three innovative, fast-paced and utterly engaging learning sessions spread over six months. The three 1.5 day Learning Sessions will occur in different locations throughout the region.

WHEN

The Collaborative kicks off in mid-March and concludes October 1st. Each of the three Learning Sessions starts at 3:00 p.m. Sunday and concludes by 3:30 p.m. Monday. Learning Sessions will be held April 29th-30th, June 24th-25th, and September 30th-October 1st. Preceding the first Learning Session will be a Leadership Conference for top managers of participating organizations that will provide a forum for dialogue on redesign's impact, leadership's role, and the structure of the program.

WHO

All community health centers (CHCs), migrant health centers (MHCs), federally qualified health centers (FQHCs), FQHC "look alike", National Health Service Corp sites, Public Housing grantees, and HIV and Homeless sites are eligible to apply for participation in the Redesign Collaborative. Applicants will be interviewed; those demonstrating a readiness to redesign and a commitment to meeting the Collaborative requirements will be invited to participate.

How

If you'd like to apply for participation in this groundbreaking initiative, review the requirements detailed on page two. If you can meet them, complete the Application on page three and fax to us. We will be in touch with you promptly.

The Bottom Line...

What are reasonable expectations for results? Participating organizations radically reduce patient visit time by squeezing out waiting time while increasing productivity. Below is a table comparing the AVERAGE total patient visit time (in minutes) of participating health centers BEFORE the commencement and AFTER the conclusion of the Redesign Collaborative.

	Northeast	Midwest	Pacific West	Southeast	West Central
Before	78	76	66	101	65
After	48	46	46	59	57

Below is a table the compares the AVERAGE productivity (patients seen per hour by a clinician) BEFORE the commencement of the Collaborative and AFTER the conclusion of the Collaborative. (No productivity data was tracked for the Northeast, our first Collaborative.)

	Midwest	Pacific West	Southeast	West Central
Before	2.5	2.4	2.1	2.1
After	2.9	2.9	2.9	3.9

What are the best results possible? For a sound approximation, the table below shows the POST-COLLABORATIVE AVERAGE results of TOP performing teams (i.e., top quartile) for both total patient visit time and productivity. These data indicate what is possible with redesign.

	Northeast	Midwest	Pacific West	Southeast	West Central
Cycle Time	35	32	34	34	30
Productivity	N/A	3.6	3.5	3.6	4.3

What do your colleagues say about the Redesign Collaborative's Learning Sessions?

- ◆ Everything exceeded my expectations.
- ◆ The rapid learning session [forced] us to think and act under pressure—very effective.
- ◆ An excellent learning experience.
- ◆ All meetings should be half this good.
- ◆ [We liked] being able to discuss and explore redesign with other teams.
- ◆ Liked the dialogue and the humor of all the presentations
- ◆ The presenters and coaches were exceptional.
- ◆ The expert team always understood the problems of each team.
- ◆ Excellent theoretical and experiential content.
- ◆ The most important thing is that they taught us to work in teams.
- ◆ Very inspirational speakers. They were very patient, focused and had great humor.
- ◆ We really enjoyed interacting with other teams.
- ◆ It was ...very supportive of our group that is having difficulties.
- ◆ It was well organized and stimulating. Methods of presentation were creative and unique.

Collaborative Requirements...

The objective of the application process is to ensure that all applicants understand what they must do to have the best chance of success in redesigning the patient visit. All organizations accepted into the Northeast Redesign Collaborative must commit to the following for the full duration of the Collaborative—from March through September 2001:

1. Commit to a specific, measurable performance goal for total patient visit time (e.g., 90% of all medical visits to your health center will be completed within __ minutes).
2. Send the CEO/Executive director and Medical Director to a one-day Leadership Conference on Redesign preceding the commencement of the Collaborative.
3. Work with the Collaborative Director to select a five member team according to the Collaborative's team selection criteria. Every team must include a provider (MD, NP, or PA).
4. Release team members from regular work duties eight hours weekly to work exclusively on redesigning the patient visit. (While this time must include a set-aside team "work session", it does not represent a loss of patient visit productivity equal to eight hours weekly since redesign testing occurs during the team's allotted team time and productivity is typically much higher than the current processes allow.)
5. Require and send the entire redesign team to three Learning Sessions and pay for any incurred travel costs (Estimated total cost: \$5,000-\$6,000).
6. Commit the CEO/Executive Director to attending the second and third Learning Sessions.
7. Oversee the team's completion of required preparatory work preceding Learning Session One.
8. Provide the team direct access to internet-based electronic mail (email).
9. Agree for the CEO/Executive Director to meet with the team biweekly for thirty minutes.
10. Commit to openly, honestly, and sincerely sharing redesign successes, setbacks, and data with other organizations participating in the Collaborative.

Milestones & Other Notes of Interest...

- ◆ Top managers attend a one day Leadership Redesign Conference on March 16, 2001.
- ◆ The key milestones are the three Learning Sessions which are scheduled as follows:
 - ◆ Learning Session One. Sunday, April 29th (3:30 pm - 7:15 pm) & Monday, April 30th (8:00 am - 3:30 pm).
 - ◆ Learning Session Two. Sunday, June 24th & Monday, June 25th. Same hours as above.
 - ◆ Learning Session Three. Sunday, September 30th & Monday, October 1st. Same hours.
- ◆ The members of Team Alpha will serve as coaches and expert presenters for this Collaborative. This seasoned team conducted the 1998 Northeast Redesign Collaborative as well as the 1999 Midwest Redesign Collaborative. The team is renown for its lively presentation of material and masterly coaching of redesign teams. The Expert Team Chair is Roger Coleman, MBA.
- ◆ The Collaborative Director is Cheryl Modica, PhD, RN, MPH. Please direct all inquiries to her (cmodica@compuserve.com).
- ◆ The Quality Center—the national sponsor of the Redesign Collaboratives—was created by the Bureau of Primary Health Care to play a lead role in driving the improvement of the health care system for underserved and vulnerable populations. Francis A. Zampello, MD is the Quality Center's Director.
- ◆ The Redesign Collaborative has the capacity to train fifteen teams. Consequently, not all applicants may be accepted into the program. Determination of final participants will be based on the degree of commitment to this process improvement effort and the capacity of the organization for dramatic change and quality improvement.

Application for Participation

Please complete the information below and fax to Cheryl Modica (631.757.0888) by the end of the business day February 16, 2001. Applications must be received by the deadline to be considered for selection. The application must be signed by the CEO/Executive Director and Medical Director to attest to top management's commitment to the objective of the Collaborative: To dramatically reduce cycle time for patient visits to the health center. Questions regarding the application should be directed to Cheryl Modica by email at cmodica@compuserve.com. Do not attach any additional information. Please print or type.

Organization name _____

Street Address _____

City/Town _____ State _____ Zip _____

Phone (____) _____ Fax (____) _____

Email _____

Please respond to the following:

1. Outline the patient visit cycle time goal to which you can commit by completing the statement.

"90% of all medical visits to our health center will be completed within _____ minutes." *(Cycle time is the total time from when a patient enters the facility until the time she/he exits.)*

2. Describe briefly why your organization wants to improve patient visit time.

3. If your health center has undertaken process improvement efforts, please summarize the outcomes.

4. Please provide the following data for the last year:

Total # of users _____ Total FTEs _____

Total # encounters _____ Total provider FTEs (MD, NP, PA) _____

Name of CEO/Executive Director (Print) _____

Signature of CEO/Executive Director _____

Name of Medical Director _____

Signature of Medical Director _____

Applicants will be notified of their participation status by March 2, 2001. CEOs/Executive Directors should not begin team recruitment until notified of acceptance since Collaborative staff will guide you through this process.



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Northeast Redesign Collaborative
c/o PO Box 113
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